OIL ASSESSMENT RENDITION

SHALL BE FILED WITH THE COUNTY APPRAISER BY APRIL 1

Schedule 2 (Class 2B) (Rev. 12/14)					County	y, Kansas		Tax Year	
Statement of							Operator ID#	#	
P.O. Address				City		State		Zip	
Name of Property				County ID#		KDOR ID#(s)		Well API#(s)	
Section I-Locatio	n of Proper	tv (required)					lue (for county use only		
Lease Description	n of 1 toper	ty (required)			Section v	Appraised	Assessed	Penalty	Total
(Well location pg 2)			Total Working	g Interest (Sec. VI.	Line 9)			,	
	Adn. Twp.			RRI Interest (Sec. V				XXXXXXXX	
	Twp. City		Itemized Equi	ipment (Sec. VI. Li					
Tax Unit	School Dist				Total				
					ase Data (require	,			
Producing Wells: Oil	Submersib		Non-Produc			WD TA		Total # Wells on	
	KCC Permit			sal: Hauler/Syste		177775 : 1		ank Batteries on I	Lease
Spud Date: Mo/Yr (new prod)		Ave Prod Dept		Horizontal ()		al WI Decimal		Prod Formation	
Comp Date: Mo/Yr (new prod) Oil Gravity	Water Prod	SWD/INJ/WS	BWPD	Horiz Total Dep		al RI&ORRI Dec		Purchaser Name	
•					Purch Address			Purch Phone	
Sec	ction IV-Pro	duction Data	(required)				Notation		
		201	4	2013					
			Casinghead	011 (2011)					
Month		Oil (Bbls)	Gas (Mcf)	Oil (Bbls)					
January February					-				
March					1				
April					-				
May					1				
June					1				
July					1				
August]				
September									
October									
November						Eastern KS Poste			
December					Severance Tax			Γax Exempt #	
Annual Production							as Production D	(conversion calcul	
Casinghead Gas (Converted to Total Annual Production			XXXXXX	XXXXXXXXX	Y Prod (Mcf) X N	= Met \$/Mcf Gas = Inc		/ Total Phi (Total	fer to Sec IV, Casing Gas Conv
Annual Decline (Bbls)	(Bbis + gas conv)		XXXXXX	XXXXXXXXX	Gatherer Name	et ø/wei Gas – me	come / Net \$/Bbi Oi	i – Total Bol (Ilalis	iei to sec iv, casing das conv
Decline Rate (%)			XXXXXX	XXXXXXXXX	Address			Phone	
			Section V	Gross Reserve	Calculation g	T-4-1 0/04h - I44)			
Schedule (A)		X	beetion v	=	c carculation (X		=	
Owner (B)		X		=		X		=	
Appraiser (C)		X		=		X		=	
	1. Annual Proc	` /		1 Net Price \$/Bbl	3. Est Gross In		. Present Worth Fac		s Reserve Value
		al Prod, Sec IV)		Oil Price Schedule)	(Multiply Line	1 X Line 2)	(Based on Decline Rate-See Tb	d) (Total 8/8ths-Transfer	Total to Sec VI, Lines 1&2)
1 D 1 00 11				X Decimal Int			Schedule (A)	Owner (B)	Appraiser (C)
1. Royalty & Overriding				Total RI & ORRI Intere		(Interest)			
2. Working Interest Value				***	X X	(Interest)			
3a. Deduct Operating Cos3b. Deduct Operating Cos					X	(Number Wells)			
3c. Deduct Operating Cos					X	(Exp Fact-Tbl)			
4. Working Interest Sub					21	(Exp r dot 151)			
5. Working Interest Min					X	(2%,5%,10% Min Lse)			
6. Copy Value from Sec	VI, Line 4 or	Line 5 (Whichever	Line is Greater)						
7a. Add Prescribed Equip	ment Value fo	or Producing W	ells (Allowance pe	er Well)	X	(Number Wells)			
7b. Add Prescribed Equip					X	(Number Wells)			
7c. Add Prescribed Equip					X	(Number Wells)			
7d. Add Prescribed Equip			Wells (Allowanc	e per Well)	X	(Number Wells)			
7e. Add Pres Equip Value			\		X	(Equip Fact-Tbl)			
 Add Itemized Equipm Working Interest Total 				8-8)					
10. Working Interest Tota					· 25% Rate)	(Rate)			
							ion io c Da	d Attacher	Dow 3141
Current Division (•							
Certification: I do he					_		ty owned or hel	d by me subjec	ct to personal
property taxation und	ler the laws	of the State o	f Kansas pı	ursuant to K.S	.A. 79-329 thr	ough 79-333.			
0	wner]	Date	Tax	Rendition Pre	parer	D	ate
Rendition In	formation:	Contact Phone		() -	Contact 1	Email	@		
Lease Code			County Code			Lease Name			

OIL ASSESSMENT RENDITION ADDITIONS PAGE MUST BE ATTACHED TO OIL ASSESSMENT RENDITION County, Kansas Tax Year Schedule 2 (Class 2B) (Rev. 12/14) Statement of Operator ID# County ID# KDOR ID#(s) Well API#(s) Name of Property Section I-IV Additional Data (required) **Well Production KDOR ID# Well Names on Lease** Location Well Type Well API# Bbls Mcf **Total Lease Production** Notation (includes all wells on lease-pg 1 rendition) **Total Bbls Total Mcf Section III Itemized Equipment (required) Property** Condition Name/Model Location (New/Used/Salvage) **Property Description** Year Series Mast (ft) Capacity (lbs) **Guide Value** Total Item Equip Value Notation (Copy Total Value to Oil Assess Rend Line 8, Sec VI) Certification: I do hereby certify that this schedule contains a full and true list of all personal property owned or held by me subject to personal property taxation under the laws of the State of Kansas pursuant to K.S.A. 79-329 through 79-333. This page must be attached to the oil assessment rendition, which must be dated and signed by owner and tax rendition preparer to be valid. Lease Code __ County Code _ Lease Name

OIL ASSESSMENT RENDITION ADDITIONS PAGE

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Statement of	Operator ID# County ID# KDOR ID#(s) Well API#(s)										
Name of Property		~					Well API#(s)				
Section III Itemized Equipment (required) Property Condition Condition											
Name/Model	Property Description	Location	(New/Used/Salvage)	Year	Series	Mast (ft)	Capacity (lbs)	Guide Value			
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	(Copy Total Value to Oil Assess Rend Line 8, Sec VI)										
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